



FORM
GD1
(Rev. 5/2012)



HAWAII STATE ETHICS COMMISSION GIFTS DISCLOSURE STATEMENT

(This report covers the period from June 1 of the preceding calendar year through June 1 of this year and is due by June 30)

'13 MAY 30 P 6:22

STATE OF HAWAII
STATE ETHICS COMMISSION

FILER

MIZUNO

Barry

Last Name

First Name

M.I.

University of Hawai'i--Board of Regents Office

University Regent

State Agency

State Position

CONTACT INFORMATION

University of Hawai'i--Board of Regents Office

2444 Dole Street, Bachman Hall 209

Number and Street or P.O. Box

Honolulu

HI

96822

City

State

Zip Code

(808) 956-8213

bor@hawaii.edu

Telephone

Extension

Email Address

GIFT INFORMATION (LIST EACH GIFT SEPARATELY)

NONE

1. Donor: _____ Date Received: _____

Gift (Description): _____ Value/Cost: _____

2. Donor: _____ Date Received: _____

Gift (Description): _____ Value/Cost: _____

3. Donor: _____ Date Received: _____

Gift (Description): _____ Value/Cost: _____

4. Donor: _____ Date Received: _____

Gift (Description): _____ Value/Cost: _____

5. Donor: _____ Date Received: _____

Gift (Description): _____ Value/Cost: _____

☐ Check here if additional sheets are attached

CERTIFICATION: I hereby certify that the above is a true, correct, and complete statement.

Signature

Date

5/25/13